

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2001

Application or Docket Number

10028170

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	85
FOR	NUMBER FILED
TOTAL CHARGEABLE CLAIMS	85 minus 20 = 65
INDEPENDENT CLAIMS	5 minus 3 = 2
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASE FEE	370.00	OR BASE FEE	340.00
X30-		OR X31B-	1086.00
X42-		OR X34-	168.00
+140-		OR +280-	
TOTAL		OR TOTAL	2074.00

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
Total	• Same	None	=	•
Independent	•	None	=	•

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		OR X31B-	
X42-		OR X34-	
+140-		OR +280-	
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	

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6-20-05

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
Total	• 80	None	= 85	• 1
Independent	• 5	None	= 5	• 1

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		OR X31B-	
X42-		OR X34-	
+140-		OR +280-	
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	

7-22-05

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Independent		
Total	• 82	None	= 85	• —
Independent	• 6	None	= 5	• 1

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X30-		OR X31B-	
X42-		OR X34-	200
+140-		OR +280-	200
TOTAL ADDT. FEE		OR TOTAL ADDT. FEE	200

* If the entry in column 1 is less than the entry in column 2, enter "0" in column 3.

* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number listed in the appropriate box in column 1.

Form 170-020 (Rev. 02/02)

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